

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

VIA ETHICS AND  
CAMPAIGN DISCLOSURE  
pms.27

2008 MAY 28 PM 12:00

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Temere

**IMPORTANT:** Indicate by # type of committee you are reporting for: ☐

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name  
Susan Temere

Political Party (if applicable)  
Democrat

Office Sought  
State Representative

District (if Senate or House)  
House47

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1752

WRS

7-15-08

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Susan Temere  
SIGNATURE OF PERSON FILING REPORT

(515) 267-1255  
TELEPHONE

May 21, 2008  
DATE SIGNED

I AM FILING A 5/21/08

(report date)

REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED 5/19/08 and amended 5/19/08

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

4,772.00

Schedule F: Loans Received total (Attach Schedule F)

1,500.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

6,272.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

3,016.09

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 3,255.91

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 557.18

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 73.23

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 1,500.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) 5/13 491.45

\$ 878.45

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

meal to board

RESET

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

2008 MAY 21 AM 9:49

SCHEDULE

H

(Rev. 02/08)

CAMPAIGN  
PROPERTY

ATTACH SCHEDULE H TO  
EACH REPORT, MAKING  
CHANGES AS REQUIRED.

☒ CHECK THIS BOX IF  
AMENDING FORM

PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
03/24/2008	Toshiba Laptop & HP Printer & 2yr printer warranty	\$491.45	\$491.45
03/01/2008	Utility table	\$85	\$85
See amended page			

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 576.45 9/6

\* If estimated, show **est.** beside figure.

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\*

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

\*\* PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_

(Attach Additional Schedules if Needed)

RESET

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

SCHEDULE

**H**

(Rev. 02/08)

CAMPAIGN  
PROPERTYATTACH SCHEDULE H TO  
EACH REPORT, MAKING  
CHANGES AS REQUIRED.☒ CHECK THIS BOX IF  
AMENDING FORM**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
03/24/2008	Toshiba Laptop & HP Printer & 2yr. printer warranty	\$491.45	\$491.45
03/01/2008	Utility Table	\$85	\$85
03/20/2008	Deadbolt	\$149	\$149
03/20/2008	Security cabinet	\$152	\$152
_____	_____	_____	_____

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 878.45

s/15 491.45

\* If estimated, show **est.** beside figure.**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

2008 MAY 28 PM 1:47  
CAMPAIGN DISCLOSURE BD.  
IA ETHICS AND

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

\*\* PROPERTY SALES &amp; TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_

(Attach Additional Schedules if Needed)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Temere

SCHEDULE

**D**

(Rev. 08/98)

INCURRED  
INDEBTEDNESS☒ **CHECK THIS BOX  
IF AMENDING  
FORM****NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
1/1/08	Susan Temere P.O. Box 743 Waukee, IA 50263	Campaign office rent	\$ 500.00
1/1/08	Susan Temere P.O. Box 743 Waukee, IA 50263	Long distance phone bill	40.00
3/30/08	Susan Temere P.O. Box 743 Waukee, IA 50263	Printing of movie flyer	17.78
			IA ETHICS AND CAMPAIGN DISCLOSURE BD. 2008 MAY 28 PM 1:47
SUB-TOTAL			\$ 557.78
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 557.78

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
810 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Temere

**IMPORTANT:** Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Susan Temere

Political Party (if applicable)

Democrat

Office Sought

House of Representatives

District (if Senate or House)

47

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
Fax

2008 MAY 19 AM 10:13  
DR-2 DISCLOSURE  
(Rev. 07/2007) REPORT  
For Office Use Only  
Comm. # 1752  
Logged In  
Scanned  
Computer WKS  
Audited 7-16-08

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Alison Ward (515) 283-8643 5/17/08  
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED 05/15/2008

*See amended report*

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below")

4,772.00

Schedule F: Loans Received total (Attach Schedule F)

1,500.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**

6,272.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")

- 3,016.09

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$

3,255.91

**UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

0.00

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

- 73.23

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

1,500.00

**CONSULTANT BREAKDOWN** (Schedule G Attached)

YES NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

591.45

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

Received 5-19-08

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input checked="" type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME (Must be same as on Statement of Organization)**

Friends of Susan Temere

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/03/2008	ID# CK#	William A Summers Robin Kline 3815 Lincoln Place Dr D M IA 503112		\$25.00	<input checked="" type="checkbox"/>
05/07/2008	ID# CK#	Isabelle Abarr 1724 7th St Des Moines IA 50314		25.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 50.00

TOTAL (if last page of this schedule)

\$ 4772.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 6 of 6  
(for Schedule A)

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50318  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE Bd.

fax

2008 MAY 16 PM 12:09

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Tenere

**IMPORTANT:** Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Susan Tenere

Political Party (if applicable)

DDemocrat

Office Sought

House of Representatives

District (if Senate or House)

47

FORM <b>DR-2</b> (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1752
Logged in	3
Scanned	
Computer	WRS
Audited	7-15-08
15 pages	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

*alper 22nd*

(515) 223-8643

5/15/08

**SIGNATURE OF PERSON FILING REPORT**

**TELEPHONE**

**DATE SIGNED**

I AM FILING A 05/19/2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED See amended report

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below")

4,722.00

Schedule F: Loans Received total (Attach Schedule F)

1,500.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL**

\$ 6,222.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")

3,016.09

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (If final report balance must be zero)

\$ 3,205.91

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 73.23

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 1,500.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 591.45

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**

Friends of Susan Tetrue

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/26/2007	ID# CK#	Janice R. Burns 348 51st St Des Moines IA 50312		\$100.00	<input type="checkbox"/>
01/30/2008	ID# CK#	Judith E Lonning 5131 Robertson Dr Des Moines IA 50312		100.00	<input type="checkbox"/>
02/02/2008	ID# CK#	Mary Lou Butcher 3864 Vista Lane Orchard Lake MI 48322		100.00	<input type="checkbox"/>
02/04/2008	ID# CK#	Jason T. Temerowski 14555 Washington Blvd Stamford CT 06907		100.00	<input type="checkbox"/>
02/09/2008	ID# CK#	Nancy M Klos 3600 Oakdale Forest Rd Edmond OK 73013		100.00	<input type="checkbox"/>
02/10/2008	ID# CK#	Selden E Spencer 823 Ashwood Dr Huxley IA 50124		100.00	<input type="checkbox"/>
02/10/2008	ID# CK#	Jean A Basinger 1335 48th St Des Moines IA 50311		25.00	<input type="checkbox"/>
02/15/2008	ID# CK#	Evelyn Glazebrook 7105 Forest Ct Des Moines IA 50311		30.00	<input type="checkbox"/>
02/13/2008	ID# CK#	Thomas Temerowski 11691 Syracuse Taylor MI 48180		100.00	<input type="checkbox"/>
02/18/2008	ID# CK#	Charles H or Ellen K Day 5325 NW Burr Oak Dr Johnston IA 50131		25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 780.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5  
(for Schedule A)



For instructions, See Back of Form

# **CONTRIBUTIONS — MONEY TAKEN IN**

(including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Terner

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
02/15/2008	ID# CK#	Laurie L. Jones 2918 Rutland Ave Apt 1 Des Moines IA 50311		\$10.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Lucille Krauss 1005 45th St Des Moines IA 50311		25.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Barbara Boatwright 2331 E 39th Ct Des Moines IA 50317		50.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Diane Krell 1620 S 43rd St W Des Moines IA 50265		200.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Charlotte Hutchison 1328 Birch Lane Des Moines IA 50315		30.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Donovan Olson 2103 Greene St Boone IA 50036		50.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Therese Murphy 155 N Grandview Ave Dubuque IA 52001		25.00	<input type="checkbox"/>
02/14/2008	ID# CK#	Chester Guinn 1041 8th St Des Moines IA 50314		25.00	<input type="checkbox"/>
02/27/2008	ID# CK#	Winifred Kelley 3663 Grand Ave #706 Des Moines IA 50312		50.00	<input type="checkbox"/>
02/29/2008	ID# CK#	Mel Kaplani 14809 Williamsburg St Riverview MI 48193		200.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 665.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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Page 2 of 5  
(for Schedule A)

For instructions, See Back of Form

**CONTRIBUTIONS — MONEY TAKEN IN**  
(including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Friends of Susan Ternere

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
02/17/2008	ID# CK#	Ellen Hogle 6300 Lookout Ln Placerville CA 95667		\$75.00	<input type="checkbox"/>
03/03/2008	ID# CK#	Alma Sims 6901 Roseland Dr Des Moines IA 50322		50.00	<input type="checkbox"/>
03/10/2008	ID# CK#	David Claypool 5754 Gallery Court W Des Moines IA 50266		50.00	<input type="checkbox"/>
03/24/2008	ID# CK#	Unitemized Cash		57.00	<input type="checkbox"/>
03/15/2008	ID# CK#	Patricia A Duffy 28135 J Ave Adel IA 50003		25.00	<input type="checkbox"/>
03/16/2008	ID# CK#	Darwin Simon 1131 35th St #4 Des Moines IA 50311		50.00	<input type="checkbox"/>
03/29/2008	ID# CK#	Doris Covatt 1534 43rd St Des Moines IA 50311		25.00	<input type="checkbox"/>
004/04/2008	ID# CK#	Maynard Boatwright 2331 E 39th Ct Des Moines IA 50317		25.00	<input type="checkbox"/>
04/03/2008	ID# CK#	Stacy Combs 3743 Kamp Dr Pleasanton CA 94588		25.00	<input type="checkbox"/>
04/04/2008	ID# CK#	CR Uhlenhake Walker 1612 13th St Des Moines IA 50314		10.00	<input type="checkbox"/>

SUB-TOTAL

\$ 392.00

TOTAL (if last page of this schedule)

\$

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Page 3 of 5  
(for Schedule A)

For instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Tomere

<b>SCHEDULE</b> <b>A</b> (Rev. 07/09)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
04/19/2008	ID# CK#	Willa J. Tharp 4111 Ingersoll Ave Apt 1005 Des Moines IA 50312		\$25.00	<input type="checkbox"/>
04/19/2008	ID# CK#	Evelyn Glazebrook 7105 Forest Ct Des Moines IA 50311		20.00	<input type="checkbox"/>
04/19/2008	ID# CK#	Margaret Rawland 5903 New York Ave Des Moines IA 50322		25.00	<input type="checkbox"/>
04/10/2008	ID# CK#	Mark Stevens 4601 Pleasant St Apt 353 Des Moines IA 50312		2300.00	<input type="checkbox"/>
04/16/2008	ID# CK#	J William or Marybeth Gardam 1629 NW 102nd St Clive IA 50325		50.00	<input type="checkbox"/>
04/26/2008	ID# CK#	Linda Lemons 335 Northview Dr Waukee IA 50263		25.00	<input type="checkbox"/>
04/27/2008	ID# CK#	Janice R. Burns 348 52nd St Des Moines IA 50312		50.00	<input type="checkbox"/>
04/19/2008	ID# CK#	C R Uhlenhake Walker 1612 13th St Des Moines IA 50314		25.00	<input type="checkbox"/>
04/26/2008	ID# CK#	Rita Hohenshell 7205 SW 15th St Des Moines IA 50315		25.00	<input type="checkbox"/>
04/12/2008	ID# CK#	Joan Zimmerman 7630 Ashworth Rd W Des Moines IA 50266		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2565.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 5  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS — MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Friends of Susan Tomerc

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
05/02/2008	ID# CK#	Forn Andrew 1030 63rd St Des Moines IA 50311		\$25.00	<input type="checkbox"/>
05/03/2008	ID# CK#	Kathleen Clark 2006 35th St Des Moines IA 50310		25.00	<input type="checkbox"/>
05/03/2008	ID# CK#	Alma Sims 6901 Roseland Dr Des Moines IA 50322		25.00	<input type="checkbox"/>
05/03/2008	ID# CK#	C R Uhlenhake Walker 1612 13th St Des Moines IA 50314		25.00	<input type="checkbox"/>
03/24/2008	ID# CK#	Jane Magers 1922 Lincoln Ave Des Moines IA 50314		20.00	<input type="checkbox"/>
05/11/2008	ID# CK#	Michael Harkin 31731 145th LN Woodward IA 50276		100.00	<input type="checkbox"/>
05/14/2008	ID# CK#	Alyce Ward 1485 S Willow Dr Des Moines IA 50266		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 320.00

TOTAL (if last page of this schedule)

\$ 472.22

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(For Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/27/2007	ID# CK#1	Carter Printing 1739 E Grand Ave Des Moines IA 50316	Letterhead	\$ 74.20
01/09/2008	ID# CK#2	Excel Business Supplies 800 S 19th St W Des Moines IA 50265	Envelopes - Box	6.88
02/08/2008	ID# CK#3	Dahls 5003 EP True Pkwy W Des Moines IA 50265	160 US Postage Stamps	65.60
02/12/2008	ID# CK#4	Des Moines Register 715 Locust St Des Moines IA 50309	Subscription	52.00
02/12/2008	ID# CK#5	Qwest	Phone Bill	48.00
02/30/2008	ID# CK#	Union State Bank 6305 Mills Civic Pkwy Ste3121 W Des Moines IA 50266	Bank Service Charges 4 Months	18.08
03/01/2008	ID# CK#1001	Susan Temere PO Box 743 Waukee IA 50263	Expenses: Office Max, Postage stamps, Walmart and Target	113.97
03/12/2008	ID# CK#	Union State Bank 6305 Mills Civic Pkwy Ste 3121 W Des Moines IA 50266	Charge for Checks	15.00
SUB-TOTAL				\$ 393.73
TOTAL (If last page of this schedule)				\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
03/03/2008	ID# CK# 1002	US Postmaster	Postage Stamps	\$ 24.60
03/09/2008	ID# CK# 1003	Qwest	Phone Bill	51.45
03/16/2008	ID# CK# 1004	Fedex Kinkos 10201 University Ave W Des Moines IA 50265	Copics	15.25
03/19/2008	ID# CK# 1005	Office Depot 3910 University Ave W Des Moines IAa 50265	USB Port Printer Cable	15.90
03/21/2008	ID# CK# 1006	Office Max 2900 University Ave W Des Moines IA 50265	Paper and Office Supplies	41.28
03/24/2008	ID# 1007 & 1008 CK#	Best Buy 6825 Mills Civic Pkwy W Des Moines IA 50266	Toshiba Lap Top and HP Photo Smart Printer and 2 yr Printer Warranty	591.45
03/25/2008	ID# CK# 1009	Strauss Lock 4663 121st St urbandale IA 50323	Security Supplies	319.06
03/26/2008	ID# CK# 1010	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Ream and 100 copies	17.50
SUB-TOTAL				\$ 1076.49
TOTAL (If last page of this schedule)				\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

# **EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temore

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04/04/2008	ID# CK# 1012	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	1501 copies and calculator	\$ 88.12
04/04/2008	ID# CK# 1013	US Postmaster -Adel	postage for bulk mailing	129.45
04/05/2008	ID# CK# 1014	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Office Supplies	21.49
04/08/2008	ID# CK# 1015	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Labels	7.36
04/09/2008	ID# CK# 1016	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Office Supplies	17.58
04/11/2008	ID# CK# 1017	Party America 6925 Mills Civic Pkwy W Des Moines IA 50266	Supplies for fund raiser	28.45
04/14/2008	ID# CK# 1018	Hy Vee 555 S 51st St W Des Moines IA 50265	Punch Ingredients for seven fundraising events	31.56
04/14/2008	ID# CK# 1019	US Post Office Adel IA 50003	Bulk Mailing	77.99
SUB-TOTAL				\$ 402.00
TOTAL (If last page of this schedule)				\$

## **THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

Page 3 of 6

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES; NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Tomerc

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04/14/2008	ID# CK# 1020	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Ream of green paper for bulk mailings.	\$ 10.05
04/21/2008	ID# CK# 1021	US Postmaster Adel IA 50003	Bulk Mailing	119.06
04/26/2008	ID# CK# 1022	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Tyvak Envelopes	27.55
04/27/2008	ID# CK# 1023	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Office Supplies	21.18
04/29/2008	ID# CK# 1024	US Post Office Adel IA 50003	Postage	4.94
04/29/2008	ID# CK# 1025	US Post Office Adel IA 50003	Bulk Mailing	76.26
04/29/2008	ID# CK# 1026	Office Max 6305 Mills Civic pkwy W Des Moines IA 50266	Office Supplies	9.32
05/02/2008	ID# CK# 1027	Qwest	Phone Bill	43.22
SUB-TOTAL				\$ 311.58
TOTAL (If last page of this schedule)				\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 4 of 6

(for Schedule B)



FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/02/2008	ID# CK# 1028	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	1 Ream Paper	\$ 11.36
05/06/2008	ID# CK# 1029	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Mailing Supplies	12.03
03/06/2008	ID# CK# 1030	Reimbursement to Susan Temere	Office Max, Lowes, Hy Vee, Nobbies, Noodle Zoo	274.11
05/07/2008	ID# CK# 1032	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Waukec Invitation, 600 Copies and 2 reams paper	59.47
05/08/2008	ID# CK#	US Post Office Adel IA 50003	Bulk Mailing - 1230 Pieces	302.58
05/08/2008	ID# CK#	Adel Library	Notecards	6.00
05/08/2008	ID# CK#	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Notebooks	25.60
05/08/2008	ID# CK#	US Post Office Adel IA 50003	Postage	8.87
SUB-TOTAL				\$ 700.02
TOTAL (If last page of this schedule)				\$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 5 of 6

(for Schedule B)

MONEY SPENT

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONEY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/08/2008	ID# CK#	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Super Glue	\$ 5.17
05/09/2008	ID# CK# 1162	US Post Office Adel IA 50003	Bulk mailing	65.01
05/13/2008	ID# CK# 1161	US Post Office Waukee IA 50263	Stamps	11.08
05/09/2008	ID# CK# 1039	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	Office Supplies	4.71
05/09/2008	ID# CK# 1038	Office Max 6305 Mills Civic Pkwy W Des Moines IA 50266	2 reams of paper for fundraisers	46.30
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 132.27

TOTAL (If last page of this schedule) \$ 3016.00

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 6 of 6

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
Friends of Susan Temere

SCHEDULE <b>E</b> (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
04/11/2008	Alyce Ward 1485 S Willow Dr W Des Moines IA 50266		3 Cakes, coffee, coffee mate, coffee cream	\$ 57.24	<input checked="" type="checkbox"/>
03/01/2008	Diane Krell 1620 S 43rd St W Des Moines IA 50266		Cake from Costco	15.99	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 73.23	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

Friends of Susan Temere

SCHEDULE

F

(Rev. 02/08)

LOANS  
RECEIVED  
& REPAYED☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$

## PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
05/14/2008	Susan Temere PO Box 743 Waukeg IA 50263	the candidate	\$ 1500.00

TOTAL (PART I) \$ 1500.00

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$

From Schedule E - TOTAL LOANS FORGIVEN \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1500.00

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1  
(for Schedule F)

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

COMMITTEE NAME (Must be same as on Statement of Organization)

**Friends of Susan Temere**

SCHEDULE

**H**

(Rev. 02/09)

CAMPAIGN  
PROPERTYATTACH SCHEDULE H TO  
EACH REPORT, MAKING  
CHANGES AS REQUIRED.☐ CHECK THIS BOX IF  
AMENDING FORM**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
03/24/2008	Toshiba Laptop & HP Photo Smart Printer & 2 yr Printer Warranty	591.45	591.45

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 591.45

\* If estimated, show est. beside figure.

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

\*\* PROPERTY SALES &amp; TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_

(Attach Additional Schedules if Needed)

Page \_\_\_\_\_ of \_\_\_\_\_ Pages  
(For Schedule H)